

Printed 02/21/2001

APPLICATION NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO
09/709, 945	11/10/2000	435	1655	25436/1190

APPLICANT
JOSEPH A SORGE, WILSON, NEW YORK.

CONTINUING DOMESTIC DATA***

VERIFIED

B/A

371 (NAT'L STAGE) DATA***

VERIFIED

FOREIGN APPLICATIONS***

VERIFIED

FOREIGN FILING LICENSE GRANTED 01/11/2001

Foreign priority claimed 35 USC 119 (a-d) conditions met	O yes O no O yes O no O Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and acknowledged _____	Examiner's Name Initials	NY	3	42	7

ADDRESS

KATHLEEN M WILLIAMS PH D
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TITLE
GENE MONITORING AND GENE IDENTIFICATION USING CDNA ARRAYS

FILING FEE RECEIVED \$*****0	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 0 1.16 Fees (Filing) <input type="checkbox"/> 0 1.17 Fees (Processing Ext. of Time) <input type="checkbox"/> 0 1.18 Fees (Issue) <input type="checkbox"/> 0 Other _____ <input type="checkbox"/> 0 Credit
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